FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SEC Mail Processing Section

JAN 172008

Washington, DC

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

131	
OMB APF	PROVAL
OMB Number:	3235-0076
Expires: April 39	0, 2008
Estimated average I	burden
hours per response:	: 16.00

SEC USE ONLY						
Prefix		Serial				
	DATE REC	EIVED				
	1					

GS TACS Active Continuous (U.S. Large Cap), LLC: Limited Liability Company Units	_
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☑ Rule 506 ☐ Section 4(6) ☐ HencesSE	U
Type of Filing: ☐ New Filing ☑ Amendment	
A. BASIC IDENTIFICATION DATA IAN 2 5 2008	
Enter the information requested about the issuer	
Name of Issuer (☐ check if this is an amendment and name has changed, and indicate change.)	
GS TACS Active Continuous (U.S. Large Cap), LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (including Area Code)	
32 Old Slip, New York, New York 10005 (212) 902-1000	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)	
(if different from Executive Offices)	1
Brief Description of Business	_
To operate as a private investment fund.	
Type of Business Organization OB022354	
Corporation — imited partnership, already formed — Bother	
□ business trust □ limited partnership, to be formed Limited Liability Company	
Month Year	_
Actual or Estimated Date of Incorporation or Organization: 0 7 0 6	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for	
State: CN for Canada; FN for other foreign jurisdiction) D E	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;

* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and									
* Each general and managing partner of partnership issuers.									
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner		Executive Officer		Director	<u> </u>	General Partner and/or Managing Partner
Full Name (Last name first, it Goldman Sachs Asset Mana		a Tec	mar's Managing M	embe	pr)				
Business or Residence Addre			et, City, State, Zip C				<u> </u>		· · · · ·
32 Old Slip, New York, NY	· · · · · · · · · · · · · · · · · · ·	ı suc	et, City, State, Zip C	.ouc)			_		
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner	☑	Executive Officer		Director	0	General Partner and/or Managing Partner
Full Name (Last name first, in Chropukva, Gary	f individual)								
Business or Residence Addre 32 Old Slip, New York, NY	•	1 Stre	et, City, State, Zip (lode)	•				
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner	Ø	Executive Officer		Director		General Partner and/or Managing Partner
Full Name (Last name first, i. Ioffe, Len	f individual)								
Business or Residence Addre 32 Old Slip, New York, NY	="	1 Stre	et, City, State, Zip (lode))				
Check Box(es) that Apply:	☐ Promoter	0	Beneficial Owner	Ø	Executive Officer	0	Director	0	General Partner and/or Managing Partner
Full Name (Last name first, in Jones, Robert	f individual)								
Business or Residence Addre 32 Old Slip, New York, NY		1 Stre	et, City, State, Zip (Code))				•
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner	Ø	Executive Officer		Director		General Partner and/or Managing Partner
Full Name (Last name first, i Litterman, Robert B.	f individual)								
Business or Residence Addre 32 Old Slip, New York, NY	•	1 Stre	et, City, State, Zip (lode))			-	
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner	Ø	Executive Officer		Director		General Partner and/or Managing Partner
Full Name (Last name first, i. Mulvihill, Donald	f individual)		- · · · · · · · · · · · · · · · · · · ·						
Business or Residence Addre 32 Old Slip, New York, NY	•	1 Stre	et, City, State, Zip (Code))				
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner	Ø	Executive Officer		Director		General Partner and/or Managing Partner
Full Name (Last name first, i Wianecki, Karl D.	f individual)								
Business or Residence Addre 32 Old Slip, New York, NY	,	1 Stre	et, City, State, Zip (Code))				
Check Box(es) that Apply:	☐ Promoter	0	Beneficial Owner	0	Executive Officer		Director		General Partner and/or Managing Partner
Full Name (Last name first, i	f individual)	···········							
Business or Residence Addre	ess (Number and	1 Stre	et, City, State, Zip (ode))				

	···			B, IN	FORMAT	ION ABO	UT OFFI	ERING				
		<u>.</u>								·-	Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									◩			
	,	i					2, if filling t	inder ULUI	ž.			
 What is the minimum investment that will be accepted from any individual? *The fund may accept subscriptions for lesser amounts in the sole discretion of the Managing Member. 								\$ 3,000,000*				
											Yes	No
3. Does the offering permit joint ownership of a single unit?									\square			
commi If a pe or state a broke	ission or sin rson to be li es, list the n er or dealer,	nilar remun sted is an a ame of the you may so	ted for each eration for s ssociated pe broker or do et forth the i	solicitation or age caler. If mo	of purchase nt of a brok ore than five	rs in connector or dealer (5) person	ction with so registered so s to be liste	ales of secu with the SE	rities in the C and/or wi	offering. th a state		
	(Last name , Sachs & C		lividual)									
Business of	or Residence	: Address (?	Number and	Street, City	y, State, Zip	Code)	<u></u>			· · · · · ·		
85 Broad	Street, Nev	York, NY	10004									
Name of A	Associated E	roker or De	ealer									
			s Solicited					****		 		
,			dividual Sta									ll States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	(MN)	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	(NM) [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
Business of	or Residence	Address (i	Number and	Street, City	y, State, Zip	Code)						
Name of A	Associated E	Broker or De	ealer				· · · · ·					
			s Solicited							**************	🗆 Al	1 States
[AL]	[AK]	[AZ]	[AR]	, [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if inc	lividual)									
											_	
Business of	or Residence	e Address (1	Number and	Street, City	y, State, Zip	Code)						
Name of A	Associated E	Broker or De	ealer									
			s Solicited					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			□	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[N]]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
נוסוז	isc)	(SD)	ומדו	[TY]	ודונו	(VT)	[VA]	(WA)	rwvi	rwn	(WY)	[PR]

[TN] [TX] [UT] [VT] [VA] [WA] [WV]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\Precedit{\sigma} \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Offering Price Sold Type of Security Debt Equity..... ☐ Common ☐ Preferred Convertible Securities (including warrants)..... Partnership Interests..... 0 0 Other (Specify) Limited Liability Company Units 626,383,607 626,383,607 626,383,607 626,383,607 Total Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases 191 Accredited Investors 626.383,607 0 Non-accredited Investors N/A N/A Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of Dollar Amount Security Sold Type of offering \$ N/A Rule 505 Regulation A N/A N/A N/A N/A Rule 504 N/A Total N/A 4.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

SEC 1972 (7-00)

0

187,223 0

0

0

187,223

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Transfer Agent's Fees

Accounting Fees

Engineering Fees.....

Sales Commissions (specify finders' fees separately).....

Total

Other Expenses (identify) legal and miscellaneous

	· · · · · · · · · · · · · · · · · · ·						
C. OFFERING PRICE,	NUMBER OF INVESTORS, EXP	PENS	ES A	AND USE OF P	ROCE	EDS	
 b. Enter the difference between the aggre- Question 1 and total expenses furnished difference is the "adjusted gross proceeds" 	ed in response to Part C - Question 4.a	a. Thi	is		\$		626,196,384
					` -		040,190,304
 Indicate below the amount of the adjusted to be used for each of the purposes showr furnish an estimate and check the box payments listed must equal the adjusted g to Part C - Question 4.b. above. 	n. If the amount for any purpose is not to the left of the estimate. The total	known of th	n, ne				
				Payments to Officers, Directors, & Affiliates			Payments To Others
Salaries and Fees			\$_	0	_ 🗆	\$_	0
Purchase of real estate			\$_	0	_ 🗆	\$_	0
Purchase, rental or leasing and installation	of machinery and equipment		\$_	0		\$_	0
Construction or leasing of plant buildings	and facilities		\$_	0	_ 🗆	\$_	0
Acquisition of other businesses (including this offering that may be used in exchanation another issuer pursuant to a merger)	ange for the assets or securities of		\$	0		\$	0
Repayment of indebtedness		_	\$ - \$	0		\$	0
Working capital			° –	0		~ _ \$	0
•	,		J		-	* -	
Other (specify): <u>Investment capital</u>			\$_	0	- 2	\$ _	626,196,384
Column Totals			\$_	0	- Ø	\$_	626,196,384
Total Payments Listed (column totals adde	ed)			Z \$	626,1	96,38	4 4
	D. FEDERAL SIGNATU	RE					
The issuer has duly caused this notice to be following signature constitutes an undertakin its staff, the information furnished by the issuer	ig by the issuer to furnish to the U.S. Sec	curities	s and	Exchange Commis	ssion, u		
Issucr (Print or Type) GS TACS Active Continuous (U.S. Large Cap), LLC	Signature Date January 15, 20						
Name of Signer (Print or Type) Richard Cundiff	Title of Signer (Print or Type) Authorized Person						

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).